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SERIAL NUMBER 10/693,042	FILING or 371(c) DATE 10/24/2003 RULE	CLASS 514	GROUP ART UNIT 1647	ATTORNEY DOCKET NO.	
APPLICANTS Nurit Kalderon, New York, NY; ** CONTINUING DATA ***** This appln claims benefit of 60/421,103 10/24/2002 ** FOREIGN APPLICATIONS ***** ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY ** 01/23/2004					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /SANDRA L WEGERT/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	STATE OR COUNTRY NY	SHEETS DRAWINGS 5	TOTAL CLAIMS 28	INDEPENDENT CLAIMS 4
ADDRESS Dr. NURIT KALDERON APT. 6J 30 RIVER ROAD NEW YORK, NY 10044 UNITED STATES					
TITLE Beta interferon for the treatment of chronic spinal cord injury					
FILING FEE RECEIVED 861	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		